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23589 7590 02/09/2006 HOVEY WILLIAMS LLP 2405 GRAND BLVD., SUITE 400 KANSAS CITY, MO 64108 P				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
			Ø/	Derry	Spain	(Depositor's name)	
		MENTATE	Attende	TERRY &	Pa: N 76068204	(Signature)	
APPLICATION NO.	FILING DATE	FIRST NAMED		O INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/791,413	03/02/2004	Mark E			34713	2553	
TITLE OF INVENTION: ST					TOTAL EFF(C) DUE	DATE DUE	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional YES		\$700		\$300	\$1000	05/09/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
EDWARDS, LA	1734		118-207000 tting on the patent front page, li				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			(1) the nar or agents ((2) the nar registered 2 registere	the names of up to 3 registered patent attorneys agents OR, alternatively, the name of a single firm (having as a member a gistered attorney or agent) and the names of up to egistered patent attorneys or agents. If no name is ed, no name will be printed. 2 Hovey Williams LLP 3			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COLDATE OF COLD							
Kege I , LLC Please check the appropriate	assignee category or catego	ries (will not be pri	Wales, FL 01 FC	2501 1504 orporation or other private gr	709.69 OP 309.06 OP oup entity Government		
			b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0522 (enclose an extra copy of this form).				
5. Change in Entity Status (from status indicated above) \[\begin{align*} \text{ \text{\text{\text{Status}}}} & \text{ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.} \] \[\begin{align*} \text{ \text{\text{\text{Status}}}} & \text{ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).} \]							
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Authorized Signature Date 4/4/2006							
Typed or printed name Stephen D. Timmons			Registration No. 26513				
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